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County of Los Angeles
CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
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Chief Executive Officer

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September 29, 2009

To: Supervisor Don Knabe, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

**REPORT ON PROGRESS IN OBTAINING REIMBURSEMENT FOR DEPARTMENT
OF HEALTH SERVICES MEDICAL HUB FORENSIC EXAMINATIONS**

On September 1, 2009, on motion of Supervisor Antonovich, your Board instructed this Office, in conjunction with the Departments of Health Services (DHS), Children and Family Services (DCFS) and Public Social Services (DPSS), to report back in 30 days, and quarterly thereafter, on our progress on the following items:

1) Working with the Medi-Cal Managed Care Health plans to establish contracts for reimbursement for Medical Hub forensic examinations for pre-detained and non-detained children involved in the child welfare system; 2) working with the California Departments of Health and Social Services on carving out reimbursement to the County for Medical Hub forensic medical examinations at the federal Medi-Cal Share of Cost level, similar to the State's agreements with school-based clinics; and 3) evaluating the feasibility of systematically accessing alternative State emergency/temporary Medi-Cal eligibility programs, such as the Child Health and Disability Prevention (CHDP) Gateway Program, for children not already enrolled in Medi-Cal.

Background

DHS indicates that most children seen at the DHS Medical Hubs appear to have some form of health insurance coverage. Most children in foster care have fee-for-service Medi-Cal coverage, and DHS is able to receive Medi-Cal reimbursement for examinations for these children. However, most children who are pre-detained or

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non-detained have coverage under Medi-Cal Managed Care, Healthy Families or private insurance, and these health plans consider a Medical Hub visit to be out-of-plan and unauthorized. Therefore, Medical Hub claims for reimbursement submitted to those plans are denied.

Reimbursement from Medi-Cal Managed Care Health Plans

As your Board is aware, there are two Medi-Cal Managed Care Plans in Los Angeles County: the local initiative plan, L.A. Care, and the commercial plan, operated by HealthNet.

L.A. Care has an existing agreement which allows school districts to be reimbursed for health services designed to provide care to its students whose families are enrolled in the L.A. Care Medi-Cal Managed Care Plan. Services include the provision of screening physicals under the Child Health and Disability Prevention (CHDP) and/or Early and Periodic Screening, Diagnosis and Treatment (EPSDT) programs for kindergarten and first grade or new entrant students. These agreements ensure the overall coordination of care and case management of L.A. Care plan members who obtain CHDP/EPSDT health assessment services through the school district sites, while maintaining their relationship with their primary care provider.

DHS staff have initiated conversations with L.A. Care, the larger of the two Medi-Cal Managed Care Plans, to discuss the potential of developing a similar agreement between L.A. Care and the County. The intent, in accordance with your Board's September 1, 2009 instruction, is to obtain reimbursement for DHS Medical Hub forensic examinations for children who have Medi-Cal Managed Care coverage. DHS has provided initial data to L.A. Care staff regarding DHS Medical Hub visits, and is working with DCFS staff to provide estimates of the potential numbers of children in the system who have Medi-Cal Managed Care coverage.

Based on this data, DHS staff will work with L.A. Care to develop a proposal which can be considered by L.A. Care executives and, ultimately, by the L.A. Care governing body and by your Board. DHS anticipates more in-depth review and further discussions over the next few months. Once a potential reimbursement mechanism has been outlined, which will serve as a framework for further negotiations, DHS will also engage in similar discussions with HealthNet representatives.

Additionally, DHS will work with this Office, County Counsel and, as appropriate, DPSS in reviewing whether such payment "carve-outs" may also be possible for other third-party coverage plans.

Each Supervisor
September 29, 2008
Page 3

Alternate State Emergency/Temporary Medi-Cal Eligibility Programs

As noted above, DHS indicates that most of the children seen at Medical Hubs appear to have health coverage, and children with third-party coverage are not eligible for temporary/emergency Medi-Cal.

As part of its regular processing, DHS financially screens patients receiving outpatient services at its facilities, including at the DHS Medical Hubs. If patients are found not to have third party coverage, they are referred to patient financial services staff for assessment and application assistance, including applications for Medi-Cal. In order to ensure that the financial screening processes are especially comprehensive for patients seen at the Medical Hubs, DHS Revenue Management staff are working with facility staff to address any issues which may hinder determining eligibility for third party coverage or accessing third party payments, including providing additional training, as needed.

As directed by your Board, DHS will provide quarterly status reports regarding their progress in these areas. The first quarterly report will be provided in January 2010.

If you have any questions or need additional information, please contact me or your staff may contact Dara Lark at (213) 974-2396, or via e-mail at dlark@ceo.lacounty.gov, or Cheri Todoroff, Deputy, DHS Planning and Program Oversight at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

WTF:SRH:SAS
MLM:DL:bjs

c: Executive Officer, Board of Supervisors
 Acting County Counsel
 Director, Department of Children and Family Services
 Interim Director, Department of Health Services
 Director, Department of Public Social Services

February 2, 2010

**Los Angeles County
Board of Supervisors**

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TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **QUARTERLY REPORT ON PROGRESS IN OBTAINING
REIMBURSEMENT FOR DEPARTMENT OF HEALTH
SERVICES MEDICAL HUB FORENSIC EVALUATIONS**

On September 1, 2009, on motion of Supervisor Antonovich, your Board instructed the Chief Executive Office (CEO), in conjunction with the Departments of Health Services (DHS), Children and Family Services (DCFS) and Public Social Services (DPSS), to report back in 30 days, and quarterly thereafter, on our progress on the following items:

1) Working with the Medi-Cal Managed Care health plans to establish contracts for reimbursement for Medical Hub forensic examinations for pre-detained and non-detained children involved in the child welfare system; 2) working with the California Departments of Health and Social Services on carving out reimbursement to the County for Medical Hub forensic medical examinations at the federal Medi-Cal Share of Cost level, similar to the State's agreements with school-based clinics; and 3) evaluating the feasibility of systematically accessing alternative State emergency/temporary Medi-Cal eligibility programs, such as the Child Health and Disability Prevention (CHDP) Gateway Program, for children not already enrolled in Medi-Cal.

The CEO provided the initial report to your Board on September 29, 2009. This serves as the first quarterly report.

Reimbursement from Medi-Cal Managed Care Health Plans

There are two Medi-Cal Managed Care plans in Los Angeles County: the local initiative, L.A. Care, and the commercial plan, operated by HealthNet. DHS staff have been working with L.A. Care staff to develop an agreement to obtain reimbursement for DHS Medical Hub forensic examinations provided to L.A. Care members. A draft agreement is being reviewed by DHS and L.A. Care. Current discussions are focused on developing a reimbursement model. Once the reimbursement model has been finalized, DHS will engage in similar discussions with HealthNet representatives.

Additionally, DHS is working with CEO, County Counsel, and DCFS on proposed legislation for County sponsorship that includes 1) carving out forensic evaluations from Medi-Cal and Healthy Families managed care plans and 2) mandating California health plans to authorize and pay for forensic evaluations provided to their members.

Alternate State Emergency/Temporary Medi-Cal Eligibility Programs

Most of the children seen at Medical Hubs have health coverage. Children with third-party coverage are not eligible for temporary/emergency Medi-Cal. In addition, Medical Hub services are provided in outpatient clinic settings and are not considered to meet the Medi-Cal definition for emergency services.

As part of its regular processing, DHS financially screens patients, including those receiving services at the Medical Hubs. If patients are found to not have third party coverage, they are referred to patient financial services staff for assessment and application assistance, including applications for Medi-Cal.

Eligible DHS Medical Hub clinicians have been asked to submit applications to become Child Health and Disability Prevention (CHDP) providers and all Medical Hubs will begin using the CHDP Gateway. Through the CHDP Gateway, children who do not have health coverage such as Medi-Cal, Healthy Families, or private insurance may receive temporary health care coverage through Medi-Cal. To continue health coverage beyond this temporary period, the family will be referred to DHS financial services staff for application assistance, including applications for Medi-Cal.

Sexual Assault Response Team (SART) Center Designation

In addition to the revenue opportunities described above, DHS is pursuing SART Center designation for the Medical Hubs. SART Centers are able to receive reimbursement from law enforcement agencies for sexual assault exams that are authorized by the law enforcement agency. The DHS Emergency Medical Services (EMS) Agency oversees the SART Center program. Currently, only the LAC+USC Medical Hub is a SART Center. The remaining DHS Medical Hubs are preparing their SART Center applications with the goal of submitting them to the EMS Agency during February 2010.

If you have any questions or need additional information, please contact me or your staff may contact Cheri Todoroff, Deputy, DHS Planning and Program Oversight, at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

JFS:ct

c: Chief Executive Office
County Counsel
Department of Children and Family Services
Department of Public Social Services
Executive Office, Board of Supervisors



Health Services
LOS ANGELES COUNTY

**Los Angeles County
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May 3, 2010

TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **QUARTERLY REPORT ON PROGRESS IN OBTAINING
REIMBURSEMENT FOR DEPARTMENT OF HEALTH
SERVICES MEDICAL HUB FORENSIC EVALUATIONS**

On September 1, 2009, on a motion by Supervisor Antonovich, your Board instructed the Chief Executive Office (CEO), in conjunction with the Departments of Health Services (DHS), Children and Family Services (DCFS) and Public Social Services (DPSS), to report back in 30 days, and quarterly thereafter, on our progress on the following items:

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This serves as the second quarterly report.

Reimbursement from Medi-Cal Managed Care Health Plans

There are two Medi-Cal Managed Care health plans in Los Angeles County: the local initiative, L.A. Care, and the commercial plan, operated by HealthNet. DHS staff have been working with L.A. Care staff to develop an agreement to obtain reimbursement for DHS Medical Hub forensic examinations provided to L.A. Care members. L.A. Care staff have reviewed Medical Hub encounter forms and Medical Hub budgets and have developed an initial reimbursement model. L.A. Care has provided DHS with the initial reimbursement model for DHS review and analysis. DHS plans to provide feedback to L.A. Care within the next ten days.

Alternate State Emergency/Temporary Medi-Cal Eligibility Programs

As reported previously, most of the children seen at Medical Hubs have health coverage and children with third-party coverage are not eligible for temporary/emergency Medi-Cal. In addition, Medical Hub services are provided in outpatient clinic settings and are not considered to meet the Medi-Cal definition for emergency services.

As part of its regular processing, DHS financially screens patients, including those receiving services at the Medical Hubs. If patients are found to not have third party coverage, they are referred to patient financial services staff for assessment and application assistance, including applications for Medi-Cal.

Facility patient financial services staff have received training on the use of the CHDP Gateway. Through the CHDP Gateway, children who do not have health coverage such as Medi-Cal, Healthy Families, or private insurance may receive temporary health care coverage through Medi-Cal. To continue health coverage beyond this temporary period patient financial services staff provide application assistance, including applications for Medi-Cal.

Sexual Assault Response Team (SART) Center Designation

SART Centers are able to receive reimbursement from law enforcement agencies for sexual assault exams that are authorized by the law enforcement agency. The DHS Emergency Medical Services (EMS) Agency oversees the SART Center program. Currently, the LAC+USC Medical Hub and the East San Gabriel Valley Medical Hub are SART Centers. To meet the 24/7 service requirement for SART Center designation, DHS examined the feasibility of establishing 24/7 SART services at Olive View Medical Center (OVMC) to provide the after-hours and weekend coverage for the OVMC Medical Hub and the High Desert Multi-Service Ambulatory Care Center (MACC) Medical Hub and establishing 24/7 SART services at Harbor-UCLA Medical Center (Harbor) to provide the after-hours and weekend coverage for the Harbor Medical Hub and the Martin Luther King, Jr. MACC Medical Hub. A preliminary fiscal analysis indicates that the costs associated with staffing and operating the 24/7 services at OVMC and Harbor are greater than the anticipated revenue that would be generated. As a result, DHS plans to centralize after-hours and weekend SART services at the LAC+USC Medical Hub. All Medical Hubs will provide SART Center services during their normal business hours. The four remaining Medical Hubs have drafted their SART Center applications and plan to finalize them and submit them to the EMS Agency by May 7, 2010.

If you have any questions or need additional information, please contact me or your staff may contact Cheri Todoroff, Deputy for Planning and Program Oversight, at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

JFS:sr

c: Chief Executive Office
County Counsel
Department of Children and Family Services
Department of Public Social Services
Executive Office, Board of Supervisors



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WILLIAM T FUJIOKA
Chief Executive Officer

August 3, 2010

To: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

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DEMAND FOR 24/7 MEDICAL HUB CAPACITY

In response to the June 1, 2010 LAC+USC Medical Center Hub Clinic Renovation Project Board Letter, the Chief Executive Office, Departments of Children and Family Services (DCFS), and Health Services (DHS) committed to provide a written report in 60 days researching the demand for additional 24/7 Medical Hub capacity. This report would take into consideration the origin of referrals by Service Planning Area (SPA) and Supervisorial Districts, and discuss the overall efforts to expand Medical Hub revenue reimbursement.

Background

Currently, there are seven Medical Hubs, including one that is privately operated. DHS operates the remaining six Medical Hubs: Harbor/UCLA Medical Center; High Desert Multi-Service Ambulatory Care Center (MACC); LAC+USC Medical Center; Martin Luther King, Jr. MACC; Olive View/UCLA Medical Center, and East San Gabriel Valley satellite to LAC+USC at MacLaren Children's Center. At this time, only the LAC+USC Medical Center is operational on a 24/7 basis. The after-hours capacity at the LAC+USC Medical Hub is not fully utilized at this time and there is currently capacity to treat additional children. All other Medical Hubs operate during regular business hours.

The Medical Hubs were established to ensure that DCFS children receive a comprehensive initial medical examination, including age-appropriate developmental and mental health screenings and a forensic evaluation, if deemed appropriate, when there is an allegation of physical or sexual abuse.

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The prioritized DCFS populations that are referred to and served by the Medical Hubs are:

1. Newly detained children placed in out-of-home care. This population is defined as children who initially enter the child welfare system and are placed in out-of-home care. (This definition includes children in an open case under a court-ordered Family Maintenance or Voluntary Family Maintenance case plan who are subsequently removed from their biological parents and placed in out-of-home care);
2. Children who are in need of a forensic evaluation to determine abuse and/or neglect, as a DCFS referral or existing case; and
3. Children with special medical conditions, i.e., diabetes, hemophilia, etc.

Per DCFS policy, Children's Social Workers (CSWs) are to utilize the Medical Hubs when investigating allegations of physical and sexual abuse and to contact the Medical Hub staff for consultation on the appropriateness of the referral. A forensic medical examination and clinical assessment is needed when a child's injuries require immediate evaluation and treatment, forensic evidence necessitates timely documentation/collection, and if an immediate review of a child's health and safety is warranted. In addition, CSWs are directed to refer children with severe or life threatening injuries to an emergency care facility or trauma center, and once stabilized, the child can be referred to a Medical Hub.

Methodology and Findings

In order to address the issue of whether 24/7 capacity should be expanded to all Medical Hubs, DCFS developed and implemented the Emergency Response Command Post (ERCP) 24/7 Needs Survey (ERCP Survey – Appendix A). From April 1, 2010 to June 30, 2010, ERCP workers were instructed to complete the ERCP survey for physical abuse, sexual abuse, and severe neglect investigation referrals. Upon completion, the ERCP Surveys were returned to DCFS for manual coding into Survey Select. The Survey Select software enabled DCFS to numerically tabulate responses to open-ended questions, and aggregate totals. In addition, written comments were analyzed to determine patterns (Appendix B).

During this period, there were a total of 323 surveys collected yielding a 17 percent response rate out of 1,884 ERCP referrals on physical abuse, sexual abuse, and severe neglect. Although a low response rate and small sample contributed to the limitations of the study, the surveys completed by the CSWs did not appear to indicate a need for after-hours Medical Hub services.

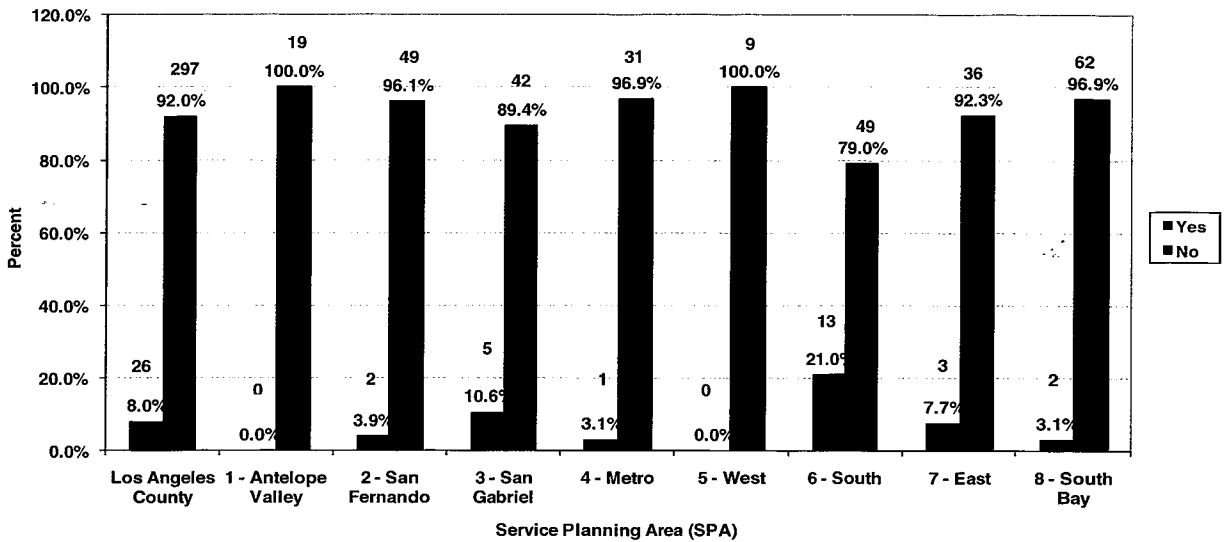
For each eligible referral, ERCP workers were asked, "Do you believe that after-hours Medical Hub services were required for these children?" (Question 3). Among the 323 completed surveys, 297 (92 percent) responded "No", and 26 (8 percent) responded "Yes". Further analysis of the 26 "Yes" responses indicated that eight of the 26 children received after-hours treatment. Five of the eight children received treatment at the LAC+USC Medical Hub – Suspected Child Abuse and Neglect Clinic, two children received treatment at the LAC+USC Medical Center and another child was served at a community-based clinic. An inventory of the 26 "Yes" responses revealed:

- Eight children were seen after-hours;
- Ten LAC+USC staff advised that the child be seen during regular business hours and appointments were given;
- Four LAC+USC staff referred the children to their primary health provider;
- Two children went to UCLA and Childrens Hospital Los Angeles;
- One child went AWOL; and
- One child refused service and was treated via ambulance.

In addition, 15 of the 26 ERCP "Yes" responses received consultation from the LAC+USC Medical Center staff. An Emergency Response (ER) Training Academy has been developed to strengthen the knowledge and skills of CSWs conducting ER investigations. This training will include a Medical Hub Policy presentation highlighting the importance of Medical Hub staff consultation. This is especially significant as after-hours Medical Hub visits tend to be physically and emotionally difficult for the children and their families. Children should only receive after-hours Medical Hub services when necessary.

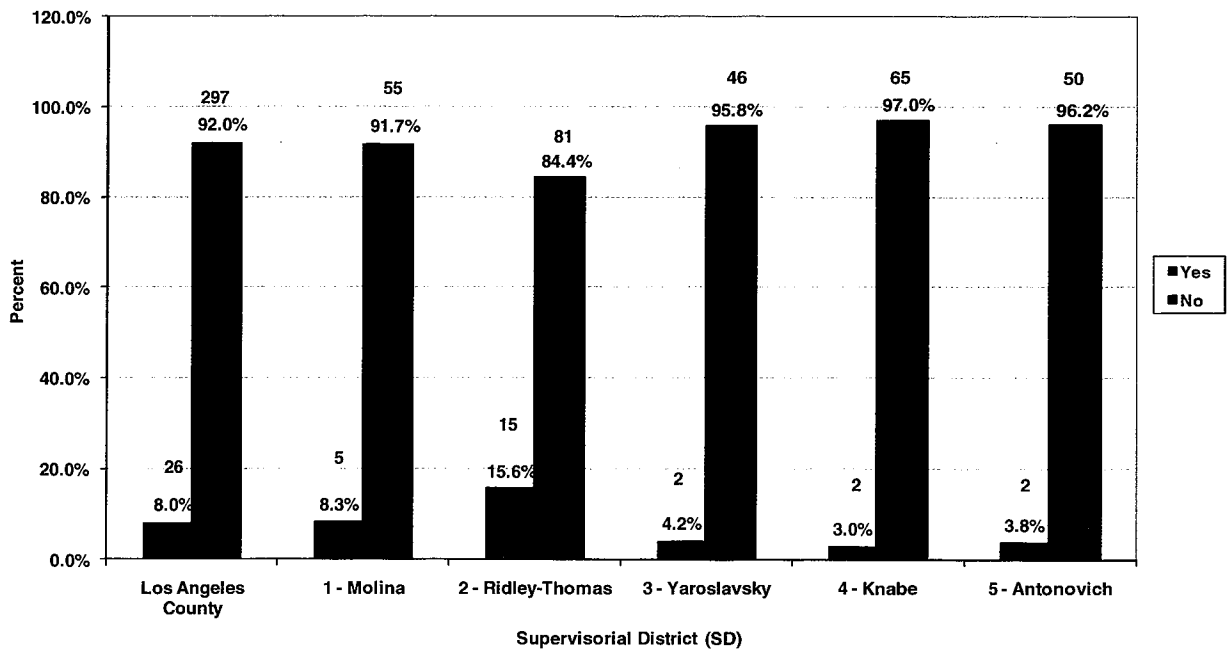
Figure 1 shows the "Yes" responses by SPA. Responses ranged from zero percent in SPAs 1 and 5 (Antelope Valley and West) to 21 percent (13) for SPA 6 (South). Figure 2 shows the "Yes" responses by Supervisorial District. "Yes" responses ranged from less than five percent for Districts 3, 4, and 5 to approximately 16 percent (15) for District 2.

**Figure 1: Q3 - Do you believe the after-hours Hub services were required for these children?
Responses by Service Planning Area (SPA)**



Source: ERCP Needs Survey

**Figure 2: Q3 - Do you believe the after-hours Hub services were required for these children?
Responses by Supervisorial District (SD)**



Source: ERCP Needs Survey

Each Supervisor
August 3, 2010
Page 5

Reimbursement from Medi-Cal Managed Care Health Plans

As directed by your Board on September 1, 2009, DHS has provided you with quarterly reports on their progress in obtaining reimbursement for DHS Medical Hub forensic evaluations. The third quarterly report will be provided in August 2010.

Summary

For approximately 92 percent of ERCP referrals, DCFS workers reported that after-hours Medical Hub services were not required. Therefore, based upon the data analysis of the ERCP Survey results, it appears that the expansion of 24/7 capacity at the Medical Hubs is not essential to serving the health and mental health needs of DCFS children. The existing LAC+USC Medical Hub is not at capacity and is capable of meeting the 24/7 needs of Los Angeles County. The recommendation is to provide additional training to CSWs on the importance of Medical Hub staff consultation prior to the transportation of children to Medical Hubs and to monitor utilization of LAC+USC Medical Center after-hours services. If LAC+USC Medical Center capacity becomes an issue, your Board will be notified.

This report fulfills the analysis for additional 24/7 capacity at the Medical Hubs and no further reports will be submitted unless otherwise instructed.

If you have any questions, please let me know or your staff may contact Kathy House, Acting Deputy Chief Executive Officer at (213) 974-4530, or via e-mail at khhouse@ceo.lacounty.gov.

WTF:KH:LB
AM:hn

Attachments (2)

c: Executive Office, Board of Supervisors
County Counsel
Children and Family Services
Health Services

EMERGENCY RESPONSE COMMAND POST (ERCP)**Needs Survey on Usage of After-Hour Medical Hub Services**

As you all know, the Department has implemented policies and procedures for our children to receive the necessary medical exams and evaluations within the guidelines provided in Procedural Guide 0900-500.00 (UTILIZATION OF MEDICAL HUBS). As the Department moves forward with implementation of systems improvement, it is critically important that we solicit input and suggestions from those of you who are involved with the demands of the job on a daily basis.

You and only you know what after-hours services are working best and you can provide information on the use of after-hours services to assist in the investigation of ER referrals. To that end, we ask that you take a few minutes to complete the following survey in relation to the referral assigned to you. Please use one survey per referral; and submit the completed survey to your SCSW.

1. Referral Number: _____ City and Zip Code: _____ Date of referral: _____
2. Number of children: _____ Age(s) of children: _____ / _____ / _____ / _____ / _____
3. Do you believe that after-hours Medical Hub services were required for these children? ☐ Yes ☐ No
4. Reason(s) why after-hours Medical Hub services were determined to be needed? Please provide specific information on the child's (children's) acute medical condition that required after hours Medical Hubs services. _____

5. If after-hours services were determined to be needed, could the child (children) have been taken to the LAC+USC Medical Hub? (*The LAC+USC Medical Hub provides 24/7 services.*)

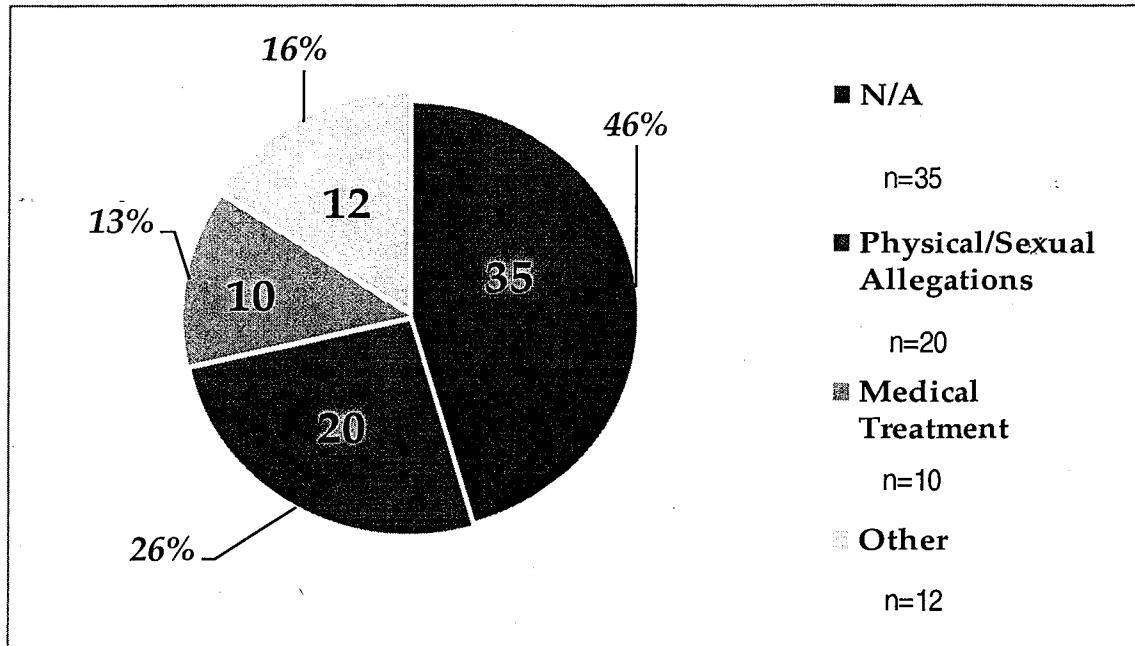
6. If no, reason(s) why the child could not go to the LAC+USC Medical Hub?

Thank you for your assistance.

Content Analysis of ERCP Survey Responses

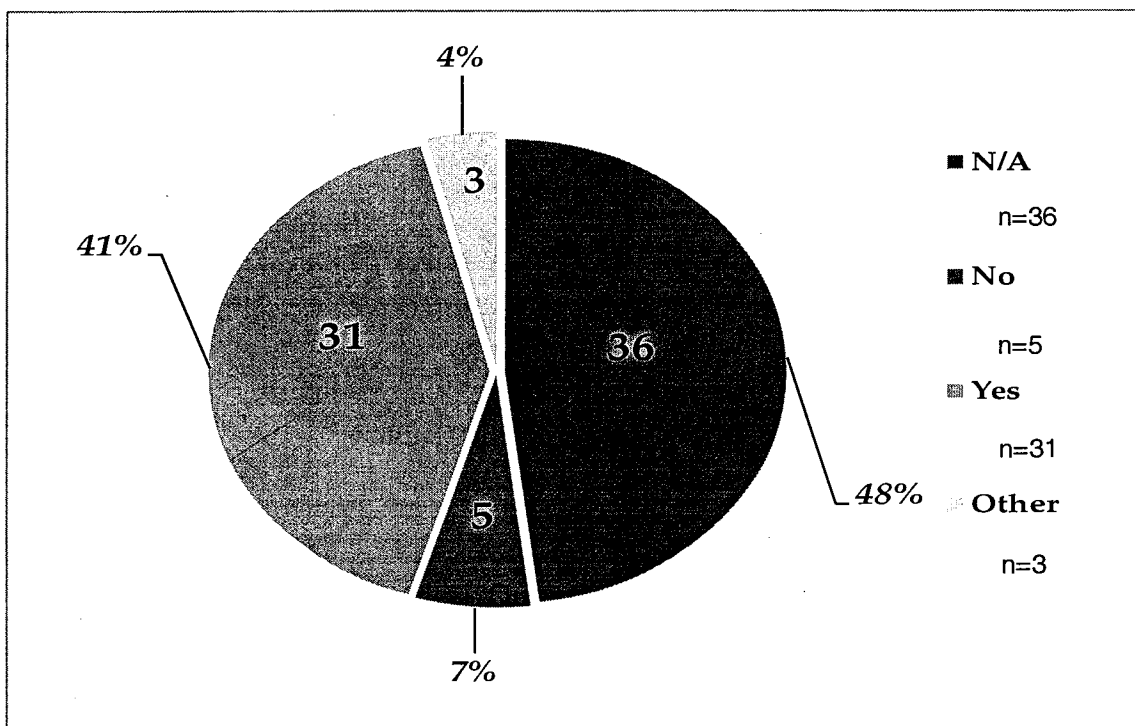
Question 4

Reason(s) why after-hours medical hub services were determined to be needed?
Please provide specific information on the child's (children's) acute medical condition that required after hours Medical Hub services.



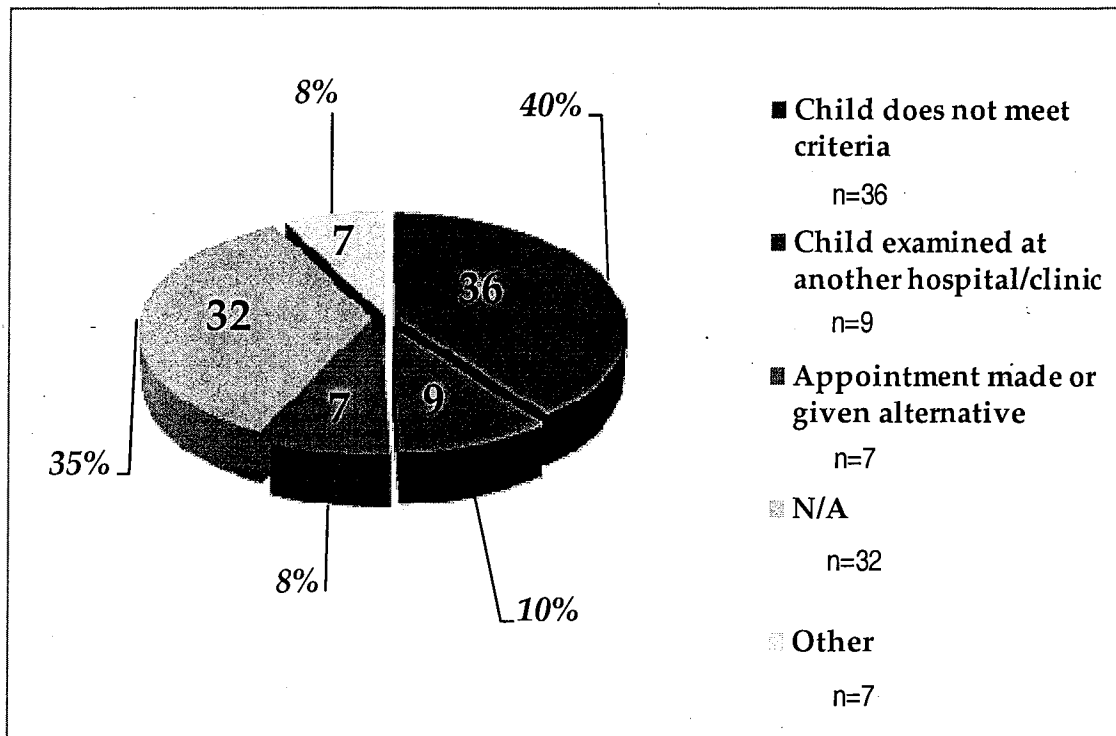
Question 5

If after-hours services were determined to be needed, could the child (children) have been taken to the LAC+USC Medical Hub?



Question 6

If no, reason(s) why the child could not go to the LAC+USC Medical Hub?





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August 6, 2010

To: Each Supervisor

From: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **QUARTERLY REPORT ON PROGRESS IN OBTAINING
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1) Working with the Medi-Cal Managed Care health plans to establish contracts for reimbursement for Medical Hub forensic examinations for pre-detained and non-detained children involved in the child welfare system; 2) working with the California Departments of Health and Social Services on carving out reimbursement to the County for Medical Hub forensic medical examinations at the federal Medi-Cal Share of Cost level, similar to the State's agreements with school-based clinics; and 3) evaluating the feasibility of systematically accessing alternative State emergency/temporary Medi-Cal eligibility programs, such as the Child Health and Disability Prevention (CHDP) Gateway Program, for children not already enrolled in Medi-Cal.

This quarterly report provides an update on item one. Items two and three were addressed in prior quarterly reports.

Reimbursement from Medi-Cal Managed Care Health Plans

There are two Medi-Cal Managed Care plans in Los Angeles County: the local initiative, L.A. Care, and the commercial plan, operated by HealthNet. DHS and L.A. Care staff have analyzed Medical Hub encounter forms and Medical Hub budgets and have developed an initial reimbursement model. L.A. Care is currently negotiating rate plan amendments with their Plan Partners and Medical Hub reimbursement will be included in the negotiations. L.A. Care anticipates that negotiations will be completed in October 2010. Concurrently, DHS and L.A. Care will finalize an agreement for Medical Hub services provided to L.A. Care members.

DHS will notify the Board when the agreement is finalized.

If you have any questions or need additional information, please contact me or your staff may contact Cheri Todoroff, Deputy, DHS Planning and Program Oversight, at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

c: Chief Executive Office
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November 2, 2010

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*To improve health
through leadership,
service and education.*



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TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **QUARTERLY REPORT ON PROGRESS IN OBTAINING
REIMBURSEMENT FOR DEPARTMENT OF HEALTH
SERVICES MEDICAL HUB FORENSIC EVALUATIONS**

On September 1, 2009, on motion of Supervisor Antonovich, your Board instructed the Chief Executive Office (CEO), in conjunction with the Departments of Health Services (DHS), Children and Family Services (DCFS) and Public Social Services (DPSS), to report back in 30 days, and quarterly thereafter, on our progress on the following items:

1) Working with the Medi-Cal Managed Care health plans to establish contracts for reimbursement for Medical Hub forensic examinations for pre-detained and non-detained children involved in the child welfare system; 2) working with the California Departments of Health and Social Services on carving out reimbursement to the County for Medical Hub forensic medical examinations at the federal Medi-Cal Share of Cost level, similar to the State's agreements with school-based clinics; and 3) evaluating the feasibility of systematically accessing alternative State emergency/temporary Medi-Cal eligibility programs, such as the Child Health and Disability Prevention (CHDP) Gateway Program, for children not already enrolled in Medi-Cal.

This quarterly report provides an update on item one. Items two and three were addressed in prior quarterly reports.

Reimbursement from Medi-Cal Managed Care Health Plans

L.A. Care has informed DHS that reimbursement to DHS for Medical Hub services provided to L.A. Care members was discussed with the L.A. Care Board of Governors committee that is in charge of Plan Partner negotiations during a meeting in October 2010. The committee approved the decision for L.A. Care to engage Plan Partners in discussions pertaining to contracting with DHS to provide Medical Hub services to L.A. Care members. L.A. Care has indicated that they would wrap up negotiations with Plan Partners and provide DHS with a proposed reimbursement rate and agreement in the coming weeks. DHS will notify the Board of the proposed reimbursement rate and agreement terms.

Each Supervisor
November 2, 2010
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If you have any questions or need additional information, please contact me or your staff may contact Cheri Todoroff, Deputy, DHS Planning and Program Oversight, at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

c: Chief Executive Office
County Counsel
Department of Children and Family Services
Department of Public Social Services
Executive Office, Board of Supervisors

June 2, 2011

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Board of Supervisors**

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



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TO: Each Supervisor

FROM: Mitchell H. Katz
Director



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This quarterly report provides an update on item one. Items two and three were addressed in prior quarterly reports.

Reimbursement from Medi-Cal Managed Care Health Plans

L.A. Care has informed DHS that it is in the process of executing amendments to its Plan Partner Services Agreements (PPSA) which will include reimbursement requirements for Medical Hub services retroactive to October 20, 2010. L.A. Care is preparing a similar amendment to its PPSA with the Community Health Plan. DHS will seek Board approval of this amendment sometime in July.

If you have any questions or need additional information, please contact me or your staff may contact Cheri Todoroff, at (213) 240-8272 or via e-mail at ctodoroff@dhs.lacounty.gov.

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Department of Children and Family Services
Department of Public Social Services